## PART B - FEE(S) TRANSMITTAL

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| maintenance fee notificati   | Olia.  |  |                                     |  |                  |                   |                             |
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| 34845  | 7590 01/07                                     | /2009  | ***                                 |  |                  |                   |                             |
| Anderson Gorecki & Manaras LLP<br>33 NAGOG PARK<br>ACTON, MA 01720   |  |  |                                     | I hereby certify that this Feed' I mannital is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE Filt: address above, or being facsimil transmitted to the USPTO (571) 273-2885, on the date indicated below. |                  |                   |                             |
|  |  |  |                                     | Christing  | M. Mo            | KISSET            | e, (Depositor's name        |
|  |  |  | L                                   | Christ-  | e Tu             | prons             | sitte (Signature            |
|  |  |  | L.                                  | Janu   | ary 2            | 7,200             | 9 (Date                     |
| APPLICATION NO.  | FILING DATE                                    |  | FIRST NAMED INVENTO                 | R  | ATTORNEY         | DOCKET NO.        | CONFIRMATION NO.            |
| 10/781,121 02/18/2004  |  |  | Floyd Backes                        |  | 160              | -031              | 1979                        |
| APPLN, TYPE  | OMALI TAPPETO                                  | ISSUE FEE DUE  | In the second                       |  |                  |                   | T                           |
|  | SMALL ENTITY<br>NO                             |  | PUBLICATION FEE DUE                 |  | JE FEE TOT       | AL FEE(S) DUE     | DATE DUE                    |
| nonprovisional   |  | \$1510   | \$300                               | \$0  |                  | \$1810            | 04/07/2009                  |
| EXAMINER   |  | ART UNIT   | CLASS-SUBCLASS                      | J  |                  |                   |                             |
| PHAM, BRENDA H  1. Change of correspondence address or indication of CFR 1.363).   |  | 2416   | 370-331000  2. For printing on the  |  |                  |                   |                             |
| CFR 1.363).  Change of correspo Address form PTO/SB/ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.  | ndence address (or Cha<br>122) attached.       | 1. Of the name of up to 3 registered potent attorneys  1. And Prson Gorec  (2) the name of a single from theirige as a member a registered attorney or greatly add the name of up to  2. registered patent attorneys or ages. If no name is  stitled, no name will be printed. |                                     |  |                  |                   |                             |
| 3. ASSIGNER NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assigne is identified below, no assignee that will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 97 CFR 3.11. Completion of this form is NOT1 a substitute for filing an assignment (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Autoce   Laboratories, Three Actor, MA USA  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual ** Corporation or other private group entity*  Government* |  |  |                                     |  |                  |                   |                             |
| 4a. The following fee(s) are submitted:  4b. Psyment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  4ch policionary fee (s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Phymen by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the requiring fee(s), any deficiency, or credit any everyment, to Depoint Account Number 50 1411/46. (calciole an extra copy of this form).  |  |  |                                     |  |                  |                   |                             |
| <ol> <li>Change in Entity State</li> <li>a. Applicant claims</li> </ol>  | SMALL ENTITY state                             | is. See 37 CFR 1.27.   | ☐ b. Applicant is no lo             |  |                  |                   |                             |
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| Authorized Signature _ Typed or printed name   | Holmes   | 2. A. Anders   | son                                 | Date   | Sanue<br>No. 37  | νη 27,<br>1, 272  | 2009                        |
| This collection of informal<br>an application. Confidenti-<br>submitting the completed<br>this form and/or suggestio<br>Box 1450, Alexandria, Vir<br>Alexandria, Virginia 2231<br>Under the Paperwork Redu   | J-1-150.                                       |  |                                     |  |                  |                   |                             |